

Aug-19-2004 12:10

From-BOMER RECREATIF

+450 461 7748

T-892 P.003/010 F-145

**RECEIVED
CENTRAL FAX CENTER**

AUG 19 2004

PTO/38/22 (08-03)

Approved for use through 12/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.

#18
P. allen
09/01/04

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 200300238US1																													
In re Application of KORENJAK, Norbert Application Number 09/859,410 Filed 05/18/2001 For Direct-Drive Assembly for a Go-Kart Art Unit 3618 Examiner VANAMAN, Frank Bennett																															
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;"><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td style="width: 15%; text-align: right;">\$ _____</td> </tr> <tr> <td><input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: right;">\$ 420.00</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> A check in the amount of the fee is enclosed.</td> </tr> <tr> <td colspan="2"><input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number _____.</td> </tr> </table> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <ul style="list-style-type: none"> <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). <input type="checkbox"/> attorney or agent of record. Registration Number _____ <input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) 40,576 <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">08/19/04</td> <td style="width: 40%; text-align: center;">Date</td> <td style="width: 30%; text-align: right;">Signature _____</td> </tr> <tr> <td>450-461-7700</td> <td style="text-align: center;">Jonathan Cutler, Esq.</td> <td style="text-align: right;">Typed or printed name _____</td> </tr> <tr> <td colspan="2">Telephone Number</td> <td style="text-align: right;">_____ _____ _____</td> </tr> </table> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input checked="" type="checkbox"/> Total of 1 forms are submitted.</p> <p>This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to be (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p> <p>If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.</p>			<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ _____	<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ 420.00	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ _____	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ _____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____	 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____		<input type="checkbox"/> A check in the amount of the fee is enclosed.		<input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.		<input type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number _____.		08/19/04	Date	Signature _____	450-461-7700	Jonathan Cutler, Esq.	Typed or printed name _____	Telephone Number		_____ _____ _____
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ _____																														
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ 420.00																														
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ _____																														
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ _____																														
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____																														
 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____																															
<input type="checkbox"/> A check in the amount of the fee is enclosed.																															
<input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.																															
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.																															
<input type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number _____.																															
08/19/04	Date	Signature _____																													
450-461-7700	Jonathan Cutler, Esq.	Typed or printed name _____																													
Telephone Number		_____ _____ _____																													

08/23/2004 CNGUYEN 08000004 09859410

02 FC:1252

420.00 OP